



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST				
NAME (Last)		(First)	(Middle)	TELEPHONE
Hall, Alan F.		Hall		425-774-9566
MAILING ADDRESS (Street)				FAX
420 Bell Street				425-712-8699
(City)		(State)	(Zip Code)	
Edmonds, Washington		98020		
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)				TELEPHONE
MAILING ADDRESS (Street)				FAX
(City)		(State)	(Zip Code)	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Court of Monte Cristo, LLC			
MAILING ADDRESS (Street)			FAX
369 Ala Malama (Box 1853)			
(City)		(State)	(Zip Code)
Kaunakakai, Hi.		96748	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Alan F. Hall, Attorney			
MAILING ADDRESS (Street)			FAX
420 Bell Street			
(City)		(State)	(Zip Code)
Edmonds, Washington		98020	

To: MILKELA From: A.F. Hall 6/9/06

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|---|
| <input checked="" type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input checked="" type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input checked="" type="checkbox"/> Transportation |
| <input checked="" type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input checked="" type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Alan F. Hall

(Signature of Lobbyist)

June 9, 2006

(Date)

PART V AUTHORIZATION TO LOBBY

NAME

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Alan F. Hall, member

NAME OF ORGANIZATION (if applicable)

TELEPHONE

Court of Monte Cristo, LLC

425.774.9566

MAILING ADDRESS (Street)

FAX

Box 1853 (369 Ala Malama)

425.712.8996

(City)

(State)

(Zip Code)

Kaunakakai, HI

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

Alan F. Hall member

6/9/06

(Signature of Authorizing Officer or Person Represented)

(Date)

ORIGINAL

STATE OF HAWAII
STATE ETHICS COMMISSION

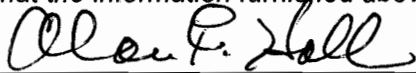
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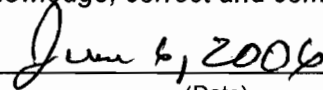
- | | | | |
|--|---|---|---|
| <input checked="" type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input checked="" type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input checked="" type="checkbox"/> Transportation |
| <input checked="" type="checkbox"/> Culture, Arts, History: Preservation | <input type="checkbox"/> Health | <input checked="" type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
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(Signature of Lobbyist)



(Date)

PART V AUTHORIZATION TO LOBBY

NAME

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

NAME OF ORGANIZATION (if applicable)

TELEPHONE

MAILING ADDRESS (Street)

FAX

(City)

(State)

(Zip Code)

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented)

(Date)